



## New Mexico – CMS SIM Design Grant Summary Sheet

### Program Overview

The Department of Health, in collaboration with the Human Services Department and with the endorsement of Governor Martinez, submitted a plan for improving health outcomes and population health, guided by the vision of “A Healthier New Mexico.”

New Mexico, like many other states, is taking a *Triple Aim* approach to health system transformation – enhancing patient experience of care, reducing health care costs, and improving population health.

New Mexico’s plan will address five main objectives:

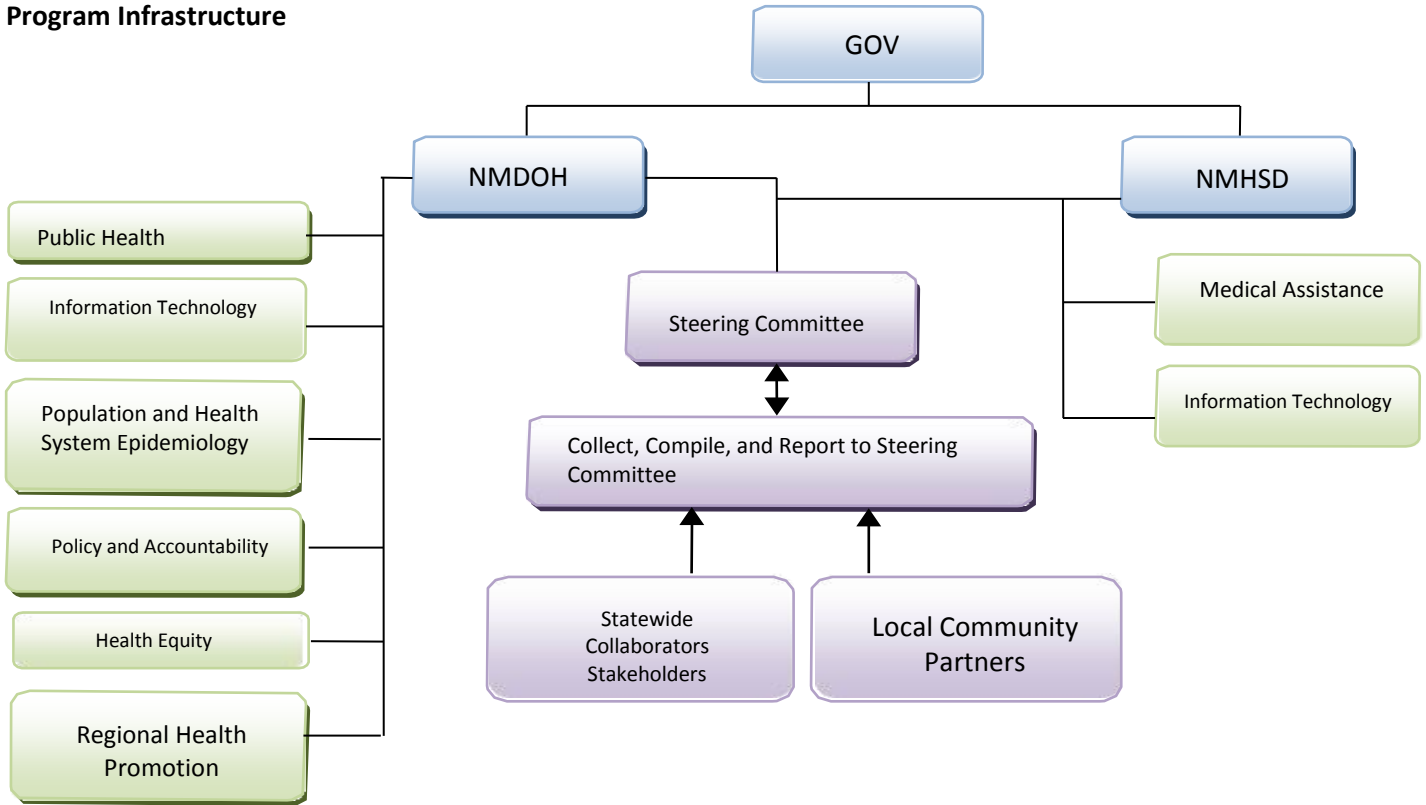
1. Alignment and integration of public health and primary care
2. Reducing costs and slowing the rate of health care inflation
3. Increasing the number of New Mexicans who have health insurance
4. Building the healthcare workforce and supporting infrastructure
5. Expanding the use and integration of health information technology

The CMS SIM Design Grant is focused on planning and extensive stakeholder engagement, bringing partners together from all facets of the health care and public health systems throughout the state to formulate ideas to achieve the plan goals.

Other concepts informing the design process include:

- *Patient-centered care*: patients are more engaged in decision-making about their health care, and treatment options reflect individual patient needs.
- *Reducing health disparities*: expansion of services to rural and underserved areas, development and use of multi-disciplinary community health teams including community EMS/paramedicine and community health workers, and increased availability and integration of behavioral health and social services.
- *Capacity building and community engagement*: creating collaborative and sustainable initiatives around preventive care and healthy lifestyle choices.
- *Patient-Centered Medical Homes (PCMH)*: comprehensive care coordinated among a team of professionals to address total patient well-being, this is an evidence-based model that reduces health care costs and improves the quality of care.
- *Outcomes-based payment models*: will complement the PCMH model and current Centennial Care initiatives by focusing on payment for positive health outcomes rather than payment for services provided, which can drive up health care costs by rewarding providers for the number and complexity of the services they provide.
- *All-Payer Claims Database (APCD)*: a potential bridge between health care and population health, an APCD is a comprehensive database of medical claims (including pharmacy and dental) that provides data transparency and allows analysis of the cost, quality, and utilization of health care in the state.
- *Health information technology (HIT)*: increase the development, adoption, use, and integration of HIT statewide, expand Telehealth services, and standardize data collection. One major component is the Health Information Exchange, which supports continuity of care by allowing easy transfer of information between providers. Patient access to health information is also important, as it allows patients to be more informed and actively involved in decisions about their care.

Program Infrastructure



Operational Plan



1. Review grant application and clarify and refine goals with stakeholders, organize internal resources, and identify steering committee
2. Steering committee and stakeholder committees meet statewide to discuss process, goals, and vision
3. Development of Model Design through stakeholder and steering committees, design will be presented to stakeholders for final feedback and sent to the Governor for approval
4. Assessment of return on investment for population health interventions and cost savings for public health services, a simulation model will be used to determine the cost-effectiveness of the proposed Model Design
5. Steering committee will develop standardized process to prioritize design elements and develop a plan to operationalize the design
6. Developed plan for implementation including an identification of resources and budget, and continued stakeholder involvement, planning for Model Test

Stakeholder Committees

- Population Health: Child Wellness (prenatal-24), Adult Wellness (25-60), Older Adult Wellness (60-death)
- Information Technology: All Payers Claims Database (APCD), Health Information
- Health Care: Patient Centered Medical Home (PCMH) strategies, Community Health Workers and Community Paramedicine, Payers and Providers, Long Term Care

CMS Measures\*

- Obesity
- Tobacco Use
- Diabetes

\*The actual measures will be finalized at a later date in collaboration with CMS.